

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

ADDRESS (number and street)

711 HIGH STREET

GOVERNMENT RELATIONS

☐Check if different  
than previously  
reported. (ACC)

DES MOINES

IA

50392

0220

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00128918

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report (Q1)☐July 15  
Quarterly Report (Q2)☐October 15  
Quarterly Report (Q3)☐January 31  
Quarterly Report (YE)☐July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☒

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
PRE-Election  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
Post -Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

06

01

2008

through

06

30

2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

MERLE PEDERSON

Signature of Treasurer

Electronically Filed by MERLE PEDERSON

Date

07

03

2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	6	0	1	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
0	6	3	0	2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>2008</span>		26325.17
(b) Cash on Hand at Beginning of Reporting Period .....	22040.13	
(c) Total Receipts (from Line 19) .....	16546.60	95011.56
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	38586.73	121336.73
7. Total Disbursements (from Line 31) .....	24500.00	107250.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	14086.73	14086.73
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	6	0	1	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
0	6	3	0	2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	10245.00	37880.89
(i) Itemized (use Schedule A) .....	6301.60	57130.67
(ii) Unitemized .....	16546.60	95011.56
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	16546.60	95011.56
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	16546.60	95011.56
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	16546.60	95011.56

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	13500.00	86750.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	11000.00	20500.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	24500.00	107250.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	24500.00	107250.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	16546.60	95011.56
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	16546.60	95011.56
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

CRAIG BASSETT

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Financial Group

Occupation  
VP & Treasurer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.68

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.14431

Amount of Each Receipt this Period

31.74

**B.**

Full Name (Last, First, Middle Initial)

CRAIG BASSETT

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Financial Group

Occupation  
VP & Treasurer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301.42

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.14430

Amount of Each Receipt this Period

31.74

**C.**

Full Name (Last, First, Middle Initial)

MICHAEL BEER

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Financial Group

Occupation  
VP-Mutual Funds & Broker Dealer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.14455

Amount of Each Receipt this Period

35.00

**SUBTOTAL** of Receipts This Page (optional) .....

98.48

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

MICHAEL BEER

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP-Mutual Funds & Broker Dealer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

455.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.14454

Amount of Each Receipt this Period

35.00

**B.**

Full Name (Last, First, Middle Initial)

LOUISE BILLMEYER

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP - Health IT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

468.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.14479

Amount of Each Receipt this Period

39.00

**C.**

Full Name (Last, First, Middle Initial)

LOUISE BILLMEYER

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP - Health IT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

507.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.14480

Amount of Each Receipt this Period

39.00

**SUBTOTAL** of Receipts This Page (optional) .....

113.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

KIM BLAUGHER

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP Consulting

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.14494

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)

KIM BLAUGHER

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP Consulting

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.14493

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)

PATTI BLUMER

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
Asst Fed Leg Dir-Fed Gov't Rel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

528.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.14501

Amount of Each Receipt this Period

44.00

**SUBTOTAL** of Receipts This Page (optional) .....

84.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)  
PATTI BLUMER

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
Asst Fed Leg Dir-Fed Gov't Rel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

572.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.14502

Amount of Each Receipt this Period

44.00

**B.**

Full Name (Last, First, Middle Initial)  
CHRISTOPHER BOWMAN

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP- Sales Engineering

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.14515

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)  
CHRISTOPHER BOWMAN

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP- Sales Engineering

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.14516

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

144.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

DAVID BROWN

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP-Product & Distrib Compliance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.66

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.14539

Amount of Each Receipt this Period

31.74

**B.**

Full Name (Last, First, Middle Initial)

DAVID BROWN

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP-Product & Distrib Compliance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

347.40

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.14540

Amount of Each Receipt this Period

31.74

**C.**

Full Name (Last, First, Middle Initial)

PAUL BROWN

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP- Institutional Mkt Segment

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

468.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.14545

Amount of Each Receipt this Period

39.00

**SUBTOTAL** of Receipts This Page (optional) .....

102.48

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

PAUL BROWN

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP- Institutional Mkt Segment

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

507.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.14546

Amount of Each Receipt this Period

39.00

**B.**

Full Name (Last, First, Middle Initial)

NED BURMEISTER

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP-CFO & Risk Mgr-Prin Intrn'l

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.14573

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

NED BURMEISTER

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP-CFO & Risk Mgr-Prin Intrn'l

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.14574

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

139.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

THOMAS BURNOR

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP of Sales - Retirement Svcs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.20

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.14576

Amount of Each Receipt this Period

28.85

**B.**

Full Name (Last, First, Middle Initial)

THOMAS BURNOR

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP of Sales - Retirement Svcs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.05

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.14575

Amount of Each Receipt this Period

28.85

**C.**

Full Name (Last, First, Middle Initial)

GREGORY BURROWS

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP - Full Svc Accum Client Svc

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

692.28

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.14579

Amount of Each Receipt this Period

57.69

**SUBTOTAL** of Receipts This Page (optional) .....

115.39

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

GREGORY BURROWS

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Financial Group

Occupation  
VP - Full Svc Accum Client Svc

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

749.97

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.14580

Amount of Each Receipt this Period

57.69

**B.**

Full Name (Last, First, Middle Initial)

CHRIS CALOS

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Financial Group

Occupation  
VP Group Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

367.20

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.14594

Amount of Each Receipt this Period

31.85

**C.**

Full Name (Last, First, Middle Initial)

CHRIS CALOS

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Financial Group

Occupation  
VP Group Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.05

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.14593

Amount of Each Receipt this Period

31.85

**SUBTOTAL** of Receipts This Page (optional) .....

121.39

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)  
NICHOLAS CECERE

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP-Career Distribution

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.52

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.14599

Amount of Each Receipt this Period

38.46

**B.**

Full Name (Last, First, Middle Initial)  
NICHOLAS CECERE

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP-Career Distribution

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.98

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.14600

Amount of Each Receipt this Period

38.46

**C.**

Full Name (Last, First, Middle Initial)  
LILLIAN CHEN

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP Tax

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.14603

Amount of Each Receipt this Period

32.00

**SUBTOTAL** of Receipts This Page (optional) .....

108.92

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

LILLIAN CHEN

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP Tax

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.14604

Amount of Each Receipt this Period

32.00

**B.**

Full Name (Last, First, Middle Initial)

BARRIE CHRISTMAN

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP-Individual Investor Svcs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.64

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.14612

Amount of Each Receipt this Period

38.47

**C.**

Full Name (Last, First, Middle Initial)

BARRIE CHRISTMAN

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP-Individual Investor Svcs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.11

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.14611

Amount of Each Receipt this Period

38.47

**SUBTOTAL** of Receipts This Page (optional) .....

108.94

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)  
RONALD DANILSON

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
SVP Retirement & Investor Svcs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.14695

Amount of Each Receipt this Period

65.00

**B.**

Full Name (Last, First, Middle Initial)  
RONALD DANILSON

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
SVP Retirement & Investor Svcs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

845.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.14696

Amount of Each Receipt this Period

65.00

**C.**

Full Name (Last, First, Middle Initial)  
GARY DORTON

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP-Employer Solutions & Serv

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.88

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.14728

Amount of Each Receipt this Period

31.74

**SUBTOTAL** of Receipts This Page (optional) .....

161.74

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

GARY DORTON

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP-Employer Solutions & Serv

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

412.62

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.14727

Amount of Each Receipt this Period

31.74

**B.**

Full Name (Last, First, Middle Initial)

TIMOTHY DUNBAR

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
Exec Dir - Equities

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

535.36

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.14738

Amount of Each Receipt this Period

63.46

**C.**

Full Name (Last, First, Middle Initial)

TIMOTHY DUNBAR

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
Exec Dir - Equities

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

598.82

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.14737

Amount of Each Receipt this Period

63.46

**SUBTOTAL** of Receipts This Page (optional) .....

158.66

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

GREGORY ELMING

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
SVP & Controller

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

768.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.14760

Amount of Each Receipt this Period

64.00

**B.**

Full Name (Last, First, Middle Initial)

GREGORY ELMING

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
SVP & Controller

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

832.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.14759

Amount of Each Receipt this Period

64.00

**C.**

Full Name (Last, First, Middle Initial)

RALPH EUCHER

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
SVP Retirement & Investor Svcs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.14765

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

153.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

RALPH EUCHER

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
SVP Retirement & Investor Svcs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.14766

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

NORA EVERETT

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
SVP & Deputy General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

533.46

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.14772

Amount of Each Receipt this Period

45.00

**C.**

Full Name (Last, First, Middle Initial)

NORA EVERETT

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
SVP & Deputy General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

578.46

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.14771

Amount of Each Receipt this Period

45.00

**SUBTOTAL** of Receipts This Page (optional) .....

115.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

DOUGLAS FICK

Mailing Address Principal Financial Group  
711 High StreetCity State Zip Code  
Des Moines IA 50392-0001FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Financial GroupOccupation  
VP - SBD IT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.14784

Amount of Each Receipt this Period

32.00

B.

Full Name (Last, First, Middle Initial)

DOUGLAS FICK

Mailing Address Principal Financial Group  
711 High StreetCity State Zip Code  
Des Moines IA 50392-0001FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Financial GroupOccupation  
VP - SBD IT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.14783

Amount of Each Receipt this Period

32.00

C.

Full Name (Last, First, Middle Initial)

MICHAEL FINNEGAN

Mailing Address Principal Financial Group  
711 High StreetCity State Zip Code  
Des Moines IA 50392-0001FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Financial GroupOccupation  
Chief Investment Officer-PMC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.38

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.14789

Amount of Each Receipt this Period

32.00

SUBTOTAL of Receipts This Page (optional) .....

96.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

MICHAEL FINNEGAN

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
Chief Investment Officer-PMC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

339.38

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.14790

Amount of Each Receipt this Period

32.00

**B.**

Full Name (Last, First, Middle Initial)

JED FISK

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP Corp Svc

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

337.35

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.14792

Amount of Each Receipt this Period

28.85

**C.**

Full Name (Last, First, Middle Initial)

JED FISK

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP Corp Svc

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.20

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.14791

Amount of Each Receipt this Period

28.85

**SUBTOTAL** of Receipts This Page (optional) .....

89.70

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)  
BRENT FRITZ

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP & Actuary-Individual

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.40

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.14844

Amount of Each Receipt this Period

31.74

**B.**

Full Name (Last, First, Middle Initial)  
BRENT FRITZ

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP & Actuary-Individual

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.14

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.14843

Amount of Each Receipt this Period

31.74

**C.**

Full Name (Last, First, Middle Initial)  
PAUL FROMM

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
AVP-Marketing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.76

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.14852

Amount of Each Receipt this Period

19.23

**SUBTOTAL** of Receipts This Page (optional) .....

82.71

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

PAUL FROMM

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
AVP-Marketing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.99

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.14851

Amount of Each Receipt this Period

19.23

**B.**

Full Name (Last, First, Middle Initial)

CARY FUCHS

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
AVP-Principal Funds Distrib

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.14854

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)

CARY FUCHS

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
AVP-Principal Funds Distrib

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.14853

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional) .....

59.23

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

MICHAEL GERSIE

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
Exec VP & CFO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.14873

Amount of Each Receipt this Period

80.00

**B.**

Full Name (Last, First, Middle Initial)

MICHAEL GERSIE

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
Exec VP & CFO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1040.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.14874

Amount of Each Receipt this Period

80.00

**C.**

Full Name (Last, First, Middle Initial)

THOMAS GRAF

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
SVP Investor Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.14903

Amount of Each Receipt this Period

150.00

**SUBTOTAL** of Receipts This Page (optional) .....

310.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

THOMAS GRAF

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
SVP Investor Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1950.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.14904

Amount of Each Receipt this Period

150.00

**B.**

Full Name (Last, First, Middle Initial)

LYNN GRAVES

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP-Executive Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

465.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.14910

Amount of Each Receipt this Period

40.00

**C.**

Full Name (Last, First, Middle Initial)

LYNN GRAVES

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP-Executive Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

505.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.14909

Amount of Each Receipt this Period

40.00

**SUBTOTAL** of Receipts This Page (optional) .....

230.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)  
STEVEN GRAVES

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
Mng Dir-Real Estate Operation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.14911

Amount of Each Receipt this Period

32.00

**B.**

Full Name (Last, First, Middle Initial)  
STEVEN GRAVES

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
Mng Dir-Real Estate Operation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.14912

Amount of Each Receipt this Period

32.00

**C.**

Full Name (Last, First, Middle Initial)  
VICTORIA GRAY

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
Sr Account Exec-Retirement Svc

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.14914

Amount of Each Receipt this Period

75.00

**SUBTOTAL** of Receipts This Page (optional) .....

139.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)  
VICTORIA GRAY

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
Sr Account Exec-Retirement Svc

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

975.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.14913

Amount of Each Receipt this Period

75.00

**B.**

Full Name (Last, First, Middle Initial)  
J BARRY GRISWELL

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
Chairman & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2307.60

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.14917

Amount of Each Receipt this Period

192.30

**C.**

Full Name (Last, First, Middle Initial)  
J BARRY GRISWELL

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
Chairman & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2499.90

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.14918

Amount of Each Receipt this Period

192.30

**SUBTOTAL** of Receipts This Page (optional) .....

459.60

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)  
DOUGLAS GROVE

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP - Nat'l Sales Dir Ret Svc

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.14922

Amount of Each Receipt this Period

35.00

**B.**

Full Name (Last, First, Middle Initial)  
DOUGLAS GROVE

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP - Nat'l Sales Dir Ret Svc

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

455.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.14921

Amount of Each Receipt this Period

35.00

**C.**

Full Name (Last, First, Middle Initial)  
PATRICK HALTER

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
Head of PrinREI

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

337.40

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.14936

Amount of Each Receipt this Period

31.74

**SUBTOTAL** of Receipts This Page (optional) .....

101.74

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

PATRICK HALTER

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
Head of PrinREI

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.14

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.14935

Amount of Each Receipt this Period

31.74

**B.**

Full Name (Last, First, Middle Initial)

LORAIN HARDIN

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP-Insured Medical Products

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.14950

Amount of Each Receipt this Period

35.00

**C.**

Full Name (Last, First, Middle Initial)

LORAIN HARDIN

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP-Insured Medical Products

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.14951

Amount of Each Receipt this Period

35.00

**SUBTOTAL** of Receipts This Page (optional) .....

101.74

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

MONICA HAUN

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Financial Group

Occupation  
AVP-IT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.76

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.14965

Amount of Each Receipt this Period

19.23

**B.**

Full Name (Last, First, Middle Initial)

MONICA HAUN

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Financial Group

Occupation  
AVP-IT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.99

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.14964

Amount of Each Receipt this Period

19.23

**C.**

Full Name (Last, First, Middle Initial)

CHRISTOPHER HENDERSON

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Financial Group

Occupation  
VP & Associate General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.85

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.14986

Amount of Each Receipt this Period

32.00

**SUBTOTAL** of Receipts This Page (optional) .....

70.46

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)  
CHRISTOPHER HENDERSON

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP & Associate General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

412.85

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.14987

Amount of Each Receipt this Period

32.00

**B.**

Full Name (Last, First, Middle Initial)  
TIMOTHY HILL

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
National Sales Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.14999

Amount of Each Receipt this Period

18.00

**C.**

Full Name (Last, First, Middle Initial)  
TIMOTHY HILL

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
National Sales Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.14998

Amount of Each Receipt this Period

18.00

**SUBTOTAL** of Receipts This Page (optional) .....

68.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

JILL HITTNER

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
Chief Financial Officer-PGI

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.94

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.15003

Amount of Each Receipt this Period

31.74

**B.**

Full Name (Last, First, Middle Initial)

JOYCE HOFFMAN

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
SVP & Corporate Secretary

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

736.52

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.15009

Amount of Each Receipt this Period

63.46

**C.**

Full Name (Last, First, Middle Initial)

JOYCE HOFFMAN

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
SVP & Corporate Secretary

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

799.98

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.15008

Amount of Each Receipt this Period

63.46

**SUBTOTAL** of Receipts This Page (optional) .....

158.66

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

DENNIS HOLLAND

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
Special Mkt Developer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15012

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

DANIEL HOUSTON

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
EVP Retirement & Investor Svc

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1206.92

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.15031

Amount of Each Receipt this Period

117.00

**C.**

Full Name (Last, First, Middle Initial)

DANIEL HOUSTON

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
EVP Retirement & Investor Svc

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1323.92

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.15032

Amount of Each Receipt this Period

117.00

**SUBTOTAL** of Receipts This Page (optional) .....

284.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

G DAVID HURD

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
Retiree

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.14363

Amount of Each Receipt this Period

500.00

Lump Sum Receipt

**B.**

Full Name (Last, First, Middle Initial)

BRADLEY JENSEN

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP-Chief Financial Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.88

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.15059

Amount of Each Receipt this Period

31.74

**C.**

Full Name (Last, First, Middle Initial)

BRADLEY JENSEN

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP-Chief Financial Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

412.62

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.15058

Amount of Each Receipt this Period

31.74

**SUBTOTAL** of Receipts This Page (optional) .....

563.48

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

CAREY JURY

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
SVP Health

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.15077

Amount of Each Receipt this Period

75.00

**B.**

Full Name (Last, First, Middle Initial)

CAREY JURY

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
SVP Health

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

975.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.15076

Amount of Each Receipt this Period

75.00

**C.**

Full Name (Last, First, Middle Initial)

CLIFFORD KARTHAUSER

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
Regional Managing Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15096

Amount of Each Receipt this Period

55.00

**SUBTOTAL** of Receipts This Page (optional) .....

205.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)  
MONICA KIRGAN

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP-National Service Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

432.98

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.15114

Amount of Each Receipt this Period

36.00

**B.**

Full Name (Last, First, Middle Initial)  
MONICA KIRGAN

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP-National Service Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

468.98

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.15113

Amount of Each Receipt this Period

36.00

**C.**

Full Name (Last, First, Middle Initial)  
TIMOTHY KNOTT

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP-Spec Benefits Prod & Oper

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

381.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.15119

Amount of Each Receipt this Period

31.75

**SUBTOTAL** of Receipts This Page (optional) .....

103.75

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

TIMOTHY KNOTT

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP-Spec Benefits Prod & Oper

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

412.75

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.15120

Amount of Each Receipt this Period

31.75

**B.**

Full Name (Last, First, Middle Initial)

PETER KORNWEISS

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP-Preferred Product Network

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.50

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.15129

Amount of Each Receipt this Period

27.50

**C.**

Full Name (Last, First, Middle Initial)

ELLEN LAMALE

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
SVP & Chief Actuary

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

840.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.15146

Amount of Each Receipt this Period

70.00

**SUBTOTAL** of Receipts This Page (optional) .....

129.25

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

ELLEN LAMALE

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
SVP & Chief Actuary

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

910.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.15147

Amount of Each Receipt this Period

70.00

**B.**

Full Name (Last, First, Middle Initial)

JULIA LAWLER-JOHNSON

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
SVP & Chief Inv Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

660.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.15160

Amount of Each Receipt this Period

55.00

**C.**

Full Name (Last, First, Middle Initial)

JULIA LAWLER-JOHNSON

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
SVP & Chief Inv Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.15161

Amount of Each Receipt this Period

55.00

**SUBTOTAL** of Receipts This Page (optional) .....

180.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

RICHARD LAWSON

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP-Federal Govt Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.52

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.15163

Amount of Each Receipt this Period

38.46

**B.**

Full Name (Last, First, Middle Initial)

RICHARD LAWSON

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP-Federal Govt Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.98

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.15162

Amount of Each Receipt this Period

38.46

**C.**

Full Name (Last, First, Middle Initial)

SCOTT LEIBERTON

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
Mng Dir-Product Specialist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.15168

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional) .....

96.92

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)  
SCOTT LEIBERTON

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
Mng Dir-Product Specialist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.15169

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)  
TERRANCE LILLIS

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
Chief Financial Officer- RIS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.15181

Amount of Each Receipt this Period

40.00

**C.**

Full Name (Last, First, Middle Initial)  
TERRANCE LILLIS

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
Chief Financial Officer- RIS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.15180

Amount of Each Receipt this Period

40.00

**SUBTOTAL** of Receipts This Page (optional) .....

100.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)  
GREGORY LINDE

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP-Individual Solutions & Serv

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.15185

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)  
GREGORY LINDE

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP-Individual Solutions & Serv

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.15184

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)  
DENNIS LONG

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
Vice President- PCG

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.52

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.15188

Amount of Each Receipt this Period

38.46

**SUBTOTAL** of Receipts This Page (optional) .....

88.46

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)  
DENNIS LONG

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
Vice President- PCG

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.98

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.15189

Amount of Each Receipt this Period

38.46

**B.**

Full Name (Last, First, Middle Initial)  
CHRIS MAYER

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP Defined Benefit & Ret Svcs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.15216

Amount of Each Receipt this Period

32.00

**C.**

Full Name (Last, First, Middle Initial)  
CHRIS MAYER

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP Defined Benefit & Ret Svcs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.15217

Amount of Each Receipt this Period

32.00

**SUBTOTAL** of Receipts This Page (optional) .....

102.46

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 43 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

JAMES MCCAUGHAN

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
President Global Asset Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2307.60

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.15224

Amount of Each Receipt this Period

192.30

**B.**

Full Name (Last, First, Middle Initial)

JAMES MCCAUGHAN

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
President Global Asset Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2499.90

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.15225

Amount of Each Receipt this Period

192.30

**C.**

Full Name (Last, First, Middle Initial)

DANIEL MCGEE

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP-Managing Dir-RIS Distrib

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.15233

Amount of Each Receipt this Period

40.00

**SUBTOTAL** of Receipts This Page (optional) .....

424.60

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 44 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

DANIEL MCGEE

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP-Managing Dir-RIS Distrib

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.15232

Amount of Each Receipt this Period

40.00

**B.**

Full Name (Last, First, Middle Initial)

BARBARA MCKENZIE

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
Chief Operations Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.15238

Amount of Each Receipt this Period

32.00

**C.**

Full Name (Last, First, Middle Initial)

BARBARA MCKENZIE

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
Chief Operations Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.15239

Amount of Each Receipt this Period

32.00

**SUBTOTAL** of Receipts This Page (optional) .....

104.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 45 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

ARTHUR MCMAHON

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Financial Group

Occupation  
AVP-Product Management

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.44

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.15243

Amount of Each Receipt this Period

23.87

**B.**

Full Name (Last, First, Middle Initial)

ARTHUR MCMAHON

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Financial Group

Occupation  
AVP-Product Management

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.31

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.15242

Amount of Each Receipt this Period

23.87

**C.**

Full Name (Last, First, Middle Initial)

SHELLY MEIGHAN

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Financial Group

Occupation  
Dir - Career Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.15248

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

72.74

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 46 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

SHELLY MEIGHAN

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
Dir - Career Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.15249

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

AMY MILLS

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP & Associate General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.52

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.15265

Amount of Each Receipt this Period

38.46

**C.**

Full Name (Last, First, Middle Initial)

AMY MILLS

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP & Associate General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.98

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.15264

Amount of Each Receipt this Period

38.46

**SUBTOTAL** of Receipts This Page (optional) .....

101.92

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 47 / 85

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.**Full Name (Last, First, Middle Initial)  
TIMOTHY MINARDMailing Address Principal Financial Group  
711 High StreetCity State Zip Code  
Des Moines IA 50392-0001FEC ID number of contributing  
federal political committee.**C**Name of Employer  
Principal Financial GroupOccupation  
SVP Retirement Distribution

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	3		2	0	0	8

Transaction ID: SA11AI.15267

Amount of Each Receipt this Period

65.00

**B.**Full Name (Last, First, Middle Initial)  
TIMOTHY MINARDMailing Address Principal Financial Group  
711 High StreetCity State Zip Code  
Des Moines IA 50392-0001FEC ID number of contributing  
federal political committee.**C**Name of Employer  
Principal Financial GroupOccupation  
SVP Retirement Distribution

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

845.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	0	8

Transaction ID: SA11AI.15266

Amount of Each Receipt this Period

65.00

**C.**Full Name (Last, First, Middle Initial)  
JACQUE MOHSMailing Address Principal Financial Group  
711 High StreetCity State Zip Code  
Des Moines IA 50392-0001FEC ID number of contributing  
federal political committee.**C**Name of Employer  
Principal Financial GroupOccupation  
VP- Dynamic Market Segment

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	3		2	0	0	8

Transaction ID: SA11AI.15280

Amount of Each Receipt this Period

32.00

SUBTOTAL of Receipts This Page (optional) .....

162.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

JACQUE MOHS

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP- Dynamic Market Segment

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.15281

Amount of Each Receipt this Period

32.00

**B.**

Full Name (Last, First, Middle Initial)

LESLIE MUDD

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
Regional Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.20

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.15299

Amount of Each Receipt this Period

28.85

**C.**

Full Name (Last, First, Middle Initial)

LESLIE MUDD

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
Regional Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.05

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.15298

Amount of Each Receipt this Period

28.85

**SUBTOTAL** of Receipts This Page (optional) .....

89.70

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 49 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

JOHN MULLEN

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
Sr Regional Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.15302

Amount of Each Receipt this Period

21.00

**B.**

Full Name (Last, First, Middle Initial)

JOHN MULLEN

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
Sr Regional Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.15303

Amount of Each Receipt this Period

21.00

**C.**

Full Name (Last, First, Middle Initial)

MARY O'KEEFE

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
SVP & Chief Marketing Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.76

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.15340

Amount of Each Receipt this Period

44.23

**SUBTOTAL** of Receipts This Page (optional) .....

86.23

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 50 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

MARY O'KEEFE

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
SVP & Chief Marketing Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

574.99

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.15339

Amount of Each Receipt this Period

44.23

**B.**

Full Name (Last, First, Middle Initial)

WILLIAM PAPESH

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
Chief Operations Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1084.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.14370

Amount of Each Receipt this Period

1000.00

Lump Sum Receipt

**C.**

Full Name (Last, First, Middle Initial)

GERALD PATTERSON

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP-Marketing Life & Health

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.20

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.15361

Amount of Each Receipt this Period

28.85

**SUBTOTAL** of Receipts This Page (optional) .....

1073.08

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 51 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

GERALD PATTERSON

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Financial Group

Occupation  
VP-Marketing Life & Health

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.05

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.15360

Amount of Each Receipt this Period

28.85

**B.**

Full Name (Last, First, Middle Initial)

KAREN PEARSTON

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Financial Group

Occupation  
Assistant General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.44

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.15368

Amount of Each Receipt this Period

31.74

**C.**

Full Name (Last, First, Middle Initial)

KAREN PEARSTON

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Financial Group

Occupation  
Assistant General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.18

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.15369

Amount of Each Receipt this Period

31.74

**SUBTOTAL** of Receipts This Page (optional) .....

92.33

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)  
MERLE PEDERSON

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Financial Group

Occupation  
VP-Govt Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.15372

Amount of Each Receipt this Period

32.00

**B.**

Full Name (Last, First, Middle Initial)  
MERLE PEDERSON

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Financial Group

Occupation  
VP-Govt Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.15373

Amount of Each Receipt this Period

32.00

**C.**

Full Name (Last, First, Middle Initial)  
PETER PRODOEHL

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Financial Group

Occupation  
VP Consulting

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.76

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.15414

Amount of Each Receipt this Period

19.23

**SUBTOTAL** of Receipts This Page (optional) .....

83.23

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

PETER PRODOEHL

Mailing Address Principal Financial Group  
711 High StreetCity State Zip Code  
Des Moines IA 50392-0001FEC ID number of contributing  
federal political committee.**C**Name of Employer  
Principal Financial GroupOccupation  
VP Consulting

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.99

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	0	8

Transaction ID: SA11AI.15415

Amount of Each Receipt this Period

19.23

**B.**

Full Name (Last, First, Middle Initial)

JEFFREY RADER

Mailing Address Principal Financial Group  
711 High StreetCity State Zip Code  
Des Moines IA 50392-0001FEC ID number of contributing  
federal political committee.**C**Name of Employer  
Principal Financial GroupOccupation  
Head of Financial Communicatio

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	0	8

Transaction ID: SA11AI.15427

Amount of Each Receipt this Period

16.00

**C.**

Full Name (Last, First, Middle Initial)

CHRISTOPHER REDDY

Mailing Address Principal Financial Group  
711 High StreetCity State Zip Code  
Des Moines IA 50392-0001FEC ID number of contributing  
federal political committee.**C**Name of Employer  
Principal Financial GroupOccupation  
AVP-Retirement & Investor Serv

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.48

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	3		2	0	0	8

Transaction ID: SA11AI.15442

Amount of Each Receipt this Period

23.79

SUBTOTAL of Receipts This Page (optional) .....

59.02

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 54 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)  
CHRISTOPHER REDDY

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
AVP-Retirement & Investor Serv

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.27

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.15443

Amount of Each Receipt this Period

23.79

**B.**

Full Name (Last, First, Middle Initial)  
R LUCIA RIDDLE

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP-Federal Govt Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.15468

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)  
R LUCIA RIDDLE

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP-Federal Govt Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.15469

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

123.79

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 55 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

MICHAEL ROUGHTON

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP & Associate General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

367.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.15485

Amount of Each Receipt this Period

32.00

**B.**

Full Name (Last, First, Middle Initial)

MICHAEL ROUGHTON

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP & Associate General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.15486

Amount of Each Receipt this Period

32.00

**C.**

Full Name (Last, First, Middle Initial)

ANGELA SANDERS

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
Chief Accounting Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.15504

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional) .....

84.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

ANGELA SANDERS

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
Chief Accounting Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.15505

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)

RENEE SCHAAF

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP- RIS Mktg & Strategy Dvlpmnt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

329.24

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.15517

Amount of Each Receipt this Period

32.00

**C.**

Full Name (Last, First, Middle Initial)

RENEE SCHAAF

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP- RIS Mktg & Strategy Dvlpmnt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

361.24

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.15516

Amount of Each Receipt this Period

32.00

**SUBTOTAL** of Receipts This Page (optional) .....

84.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

JOHN SCHMIDT

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP & Associate General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.15530

Amount of Each Receipt this Period

40.00

**B.**

Full Name (Last, First, Middle Initial)

JOHN SCHMIDT

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP & Associate General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.15531

Amount of Each Receipt this Period

40.00

**C.**

Full Name (Last, First, Middle Initial)

GARY SCHOLTEN

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
SVP & CIO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.15539

Amount of Each Receipt this Period

45.00

**SUBTOTAL** of Receipts This Page (optional) .....

125.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

GARY SCHOLTEN

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Financial Group

Occupation  
SVP & CIO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.15538

Amount of Each Receipt this Period

45.00

**B.**

Full Name (Last, First, Middle Initial)

EDWARD SCHUH

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Financial Group

Occupation  
Investment Specialist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.15544

Amount of Each Receipt this Period

16.00

**C.**

Full Name (Last, First, Middle Initial)

KAREN SHAFF

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0300

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Financial Group

Occupation  
Exec VP & General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1320.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.15558

Amount of Each Receipt this Period

110.00

**SUBTOTAL** of Receipts This Page (optional) .....

171.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 59 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

KAREN SHAFF

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0300

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
Exec VP & General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1430.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.15557

Amount of Each Receipt this Period

110.00

**B.**

Full Name (Last, First, Middle Initial)

DANIEL SHANAHAN

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
Regional Managing Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.15559

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)

DANIEL SHANAHAN

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
Regional Managing Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15560

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional) .....

150.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

MARTHA SHEPARD

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP & General Auditor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.52

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.15561

Amount of Each Receipt this Period

38.46

**B.**

Full Name (Last, First, Middle Initial)

MARTHA SHEPARD

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP & General Auditor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.98

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.15562

Amount of Each Receipt this Period

38.46

**C.**

Full Name (Last, First, Middle Initial)

LAUREL SHULTZ

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP- Emerging Mkt Segment

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

373.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.15568

Amount of Each Receipt this Period

33.00

**SUBTOTAL** of Receipts This Page (optional) .....

109.92

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 61 / 85

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

LAUREL SHULTZ

Mailing Address Principal Financial Group  
711 High StreetCity State Zip Code  
Des Moines IA 50392-0001FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Financial GroupOccupation  
VP- Emerging Mkt Segment

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

406.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	0	8

Transaction ID: SA11AI.15567

Amount of Each Receipt this Period

33.00

**B.**

Full Name (Last, First, Middle Initial)

ELLEN SHUMWAY

Mailing Address Principal Financial Group  
711 High StreetCity State Zip Code  
Des Moines IA 50392-0001FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Financial GroupOccupation  
VP-Corp Strategic Dvlpmnt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	3		2	0	0	8

Transaction ID: SA11AI.15570

Amount of Each Receipt this Period

32.00

**C.**

Full Name (Last, First, Middle Initial)

ELLEN SHUMWAY

Mailing Address Principal Financial Group  
711 High StreetCity State Zip Code  
Des Moines IA 50392-0001FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Financial GroupOccupation  
VP-Corp Strategic Dvlpmnt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	0	8

Transaction ID: SA11AI.15569

Amount of Each Receipt this Period

32.00

SUBTOTAL of Receipts This Page (optional) .....

97.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 62 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

TOM SMITH

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
Regional VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.20

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.15586

Amount of Each Receipt this Period

28.85

**B.**

Full Name (Last, First, Middle Initial)

TOM SMITH

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
Regional VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.05

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.15585

Amount of Each Receipt this Period

28.85

**C.**

Full Name (Last, First, Middle Initial)

NORMAN SORENSEN

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
SVP Int'l Asset Accumulation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

923.04

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.15591

Amount of Each Receipt this Period

76.92

**SUBTOTAL** of Receipts This Page (optional) .....

134.62

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 63 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)  
NORMAN SORENSEN

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
SVP Int'l Asset Accumulation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

999.96

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.15592

Amount of Each Receipt this Period

76.92

**B.**

Full Name (Last, First, Middle Initial)  
DEANNA STRABLE-SOETHOUT

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
SVP Ind Life & Spec Benefits

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

761.52

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.15621

Amount of Each Receipt this Period

63.46

**C.**

Full Name (Last, First, Middle Initial)  
DEANNA STRABLE-SOETHOUT

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
SVP Ind Life & Spec Benefits

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

824.98

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.15622

Amount of Each Receipt this Period

63.46

**SUBTOTAL** of Receipts This Page (optional) .....

203.84

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 64 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)  
TIMOTHY STUMPF

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP- Network Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.66

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.15627

Amount of Each Receipt this Period

31.74

**B.**

Full Name (Last, First, Middle Initial)  
TIMOTHY STUMPF

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP- Network Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

332.40

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.15628

Amount of Each Receipt this Period

31.74

**C.**

Full Name (Last, First, Middle Initial)  
KAREN THOMANN

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP & CIO- Retire Investor Svcs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

237.73

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.15662

Amount of Each Receipt this Period

31.74

**SUBTOTAL** of Receipts This Page (optional) .....

95.22

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 65 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

KAREN THOMANN

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP & CIO- Retire Investor Svcs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.47

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.15661

Amount of Each Receipt this Period

31.74

**B.**

Full Name (Last, First, Middle Initial)

LEANNE VALENTINE

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP & Associate General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.92

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.15697

Amount of Each Receipt this Period

31.74

**C.**

Full Name (Last, First, Middle Initial)

LEANNE VALENTINE

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP & Associate General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

293.66

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.15698

Amount of Each Receipt this Period

31.74

**SUBTOTAL** of Receipts This Page (optional) .....

95.22

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 66 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

LUKE VANDERMILLEN

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP Natl Sales Dir-Worksite Sol

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.15714

Amount of Each Receipt this Period

35.00

**B.**

Full Name (Last, First, Middle Initial)

LUKE VANDERMILLEN

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP Natl Sales Dir-Worksite Sol

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

455.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.15713

Amount of Each Receipt this Period

35.00

**C.**

Full Name (Last, First, Middle Initial)

MARIA VOLANTE

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP-Natl Accts

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.15725

Amount of Each Receipt this Period

32.00

**SUBTOTAL** of Receipts This Page (optional) .....

102.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

MARIA VOLANTE

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP-Natl Accts

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

381.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.15726

Amount of Each Receipt this Period

32.00

**B.**

Full Name (Last, First, Middle Initial)

RICHARD WAUGH

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
Executive Director-PC II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.14368

Amount of Each Receipt this Period

225.00

Lump Sum Receipt

**C.**

Full Name (Last, First, Middle Initial)

HUGH WHITE

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
Vice President-Grp Non Med

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.15779

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional) .....

277.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 68 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)  
HUGH WHITE

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
Vice President-Grp Non Med

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.15778

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)  
STEVEN WHITTY

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP Corporate Marketing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.15782

Amount of Each Receipt this Period

32.00

**C.**

Full Name (Last, First, Middle Initial)  
STEVEN WHITTY

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP Corporate Marketing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.15783

Amount of Each Receipt this Period

32.00

**SUBTOTAL** of Receipts This Page (optional) .....

84.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 69 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)  
WILLIAM WORKMAN

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP-IT Life & Disability

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.52

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.15810

Amount of Each Receipt this Period

38.46

**B.**

Full Name (Last, First, Middle Initial)  
WILLIAM WORKMAN

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
VP-IT Life & Disability

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.98

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.15809

Amount of Each Receipt this Period

38.46

**C.**

Full Name (Last, First, Middle Initial)  
LARRY ZIMPLEMAN

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Principal Financial Group

Occupation  
Pres & Chief Operating Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2030.76

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.15826

Amount of Each Receipt this Period

169.23

**SUBTOTAL** of Receipts This Page (optional) .....

246.15

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 70 / 85

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

LARRY ZIMPLEMAN

Mailing Address Principal Financial Group  
711 High StreetCity State Zip Code  
Des Moines IA 50392-0001FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Financial GroupOccupation  
Pres & Chief Operating Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2199.99

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	8	

Transaction ID: SA11AI.15825

Amount of Each Receipt this Period

169.23

SUBTOTAL of Receipts This Page (optional) .....

169.23

TOTAL This Period (last page this line number only) .....

10245.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Barney Frank for Congress Committee

Mailing Address 38 Ivy Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Contribution

Candidate Name  
Barney Frank

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MA District: 04

Transaction ID: SB23.14334

Date of Disbursement

06 / 04 / 2008

Amount of Each Disbursement this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)  
Braley for Congress

Mailing Address 426 C Street, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Contribution

Candidate Name  
Bruce Braley

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: IA District: 01

Transaction ID: SB23.14333

Date of Disbursement

06 / 04 / 2008

Amount of Each Disbursement this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
Earl Pomeroy for Congress

Mailing Address P.O. Box 75214

City Washington State DC Zip Code 20013

Purpose of Disbursement  
Contribution

Candidate Name  
Earl Pomeroy

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: ND District:

Transaction ID: SB23.14357

Date of Disbursement

06 / 27 / 2008

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Ed Royce for Congress

Mailing Address 217 Third Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Contribution

Candidate Name  
Ed Royce

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA District: 40

Transaction ID: SB23.14326

Date of Disbursement

06 / 04 / 2008

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Ellen Tauscher for Congress

Mailing Address P.O. Box 75214

City Washington State DC Zip Code 20013-5214

Purpose of Disbursement  
Contribution

Candidate Name  
Ellen Tauscher

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: CA District: 10

Transaction ID: SB23.14358

Date of Disbursement

06 / 27 / 2008

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Friends for Gregory Meeks

Mailing Address 1010 Vermont Avenue, NW  
Suite 814

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Contribution

Candidate Name  
Gregory Meeks

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 06

Transaction ID: SB23.14328

Date of Disbursement

06 / 04 / 2008

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) .....

3000.00

TOTAL This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Friends of Gordon Smith

Mailing Address 900 19th Street, NW  
8th Floor

City Washington State DC Zip Code 20006

Purpose of Disbursement  
Contribution

Candidate Name  
Gordon Smith

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: OR District:

Transaction ID: SB23.14332

Date of Disbursement

06 / 04 / 2008

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Grassley Committee, Inc.

Mailing Address P.O. Box 1000

City Des Moines State IA Zip Code 50304

Purpose of Disbursement  
Contribution

Candidate Name  
Charles Grassley

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: IA District:

Transaction ID: SB23.14335

Date of Disbursement

06 / 04 / 2008

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Lee Terry for Congress

Mailing Address P.O. Box 540098

City Omaha State NE Zip Code 68154

Purpose of Disbursement  
Contribution

Candidate Name  
Lee Terry

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NE District: 02

Transaction ID: SB23.14327

Date of Disbursement

06 / 04 / 2008

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) .....

3000.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Nelson 2012

Mailing Address 420 C Street NE

City  
Washington

State  
DC

Zip Code  
20002

Purpose of Disbursement  
Contribution

Candidate Name  
Ben Nelson

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NE District: 01

Transaction ID: SB23.14331

Date of Disbursement

06 / 04 / 2008

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Real Estate Roundtable PAC - REALPAC

Mailing Address 1420 New York Avenue, NW  
Suite 1100

City  
Washington

State  
DC

Zip Code  
20005

Purpose of Disbursement  
PAC to PAC

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.14329

Date of Disbursement

06 / 04 / 2008

Amount of Each Disbursement this Period

2500.00

C.

Full Name (Last, First, Middle Initial)

Tim Johnson for South Dakota Inc

Mailing Address 122 Maryland Avenue, NE

City  
Washington

State  
DC

Zip Code  
20002

Purpose of Disbursement  
Contribution

Candidate Name  
Tim Johnson

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: SD District:

Transaction ID: SB23.14359

Date of Disbursement

06 / 27 / 2008

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) .....

4500.00

TOTAL This Period (last page this line number only) .....

13500.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Behn for Senate	<b>Transaction ID:</b> SB29.14339 <b>Date of Disbursement</b>
Mailing Address 1313 Quill Avenue	<div> <div>06</div> <div>17</div> <div>2008</div> </div>
City Boone State IA Zip Code 50036	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Contribution	<div>250.00</div>
Candidate Name Jerry Behn	Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 24	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Citizens to Re-Elect Wayne Ford	<b>Transaction ID:</b> SB29.14312 <b>Date of Disbursement</b>
Mailing Address P.O. Box 5042	<div> <div>06</div> <div>03</div> <div>2008</div> </div>
City Des Moines State IA Zip Code 50306-5042	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Contribution	<div>250.00</div>
Candidate Name Wayne Ford	Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 65	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Committee to Elect Steve Lukan	<b>Transaction ID:</b> SB29.14316 <b>Date of Disbursement</b>
Mailing Address 7365 Columbus Street	<div> <div>06</div> <div>03</div> <div>2008</div> </div>
City New Vienna State IA Zip Code 52065	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Contribution	<div>250.00</div>
Candidate Name Steve Lukan	Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 32	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

750.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Concerned Citizens for Miller	<b>Transaction ID:</b> SB29.14345 <b>Date of Disbursement</b>																				
Mailing Address 6766 Ridges Court	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	7		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	7		2	0	0	8												
City Bettendorf State IA Zip Code 52722	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution	<table border="1"> <tr> <td>250.00</td> </tr> </table>	250.00																			
250.00																					
Candidate Name Linda Miller	Category/Type																				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 82	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Courtney for State Senate	<b>Transaction ID:</b> SB29.14320 <b>Date of Disbursement</b>																				
Mailing Address 2200 Summer Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	3		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		0	3		2	0	0	8												
City Burlington State IA Zip Code 52601	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution	<table border="1"> <tr> <td>500.00</td> </tr> </table>	500.00																			
500.00																					
Candidate Name Tom Courtney	Category/Type																				
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 44	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Danielson for Senate	<b>Transaction ID:</b> SB29.14319 <b>Date of Disbursement</b>																				
Mailing Address 3906 Monterey Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	3		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		0	3		2	0	0	8												
City Waterloo State IA Zip Code 50701-3527	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution	<table border="1"> <tr> <td>500.00</td> </tr> </table>	500.00																			
500.00																					
Candidate Name Jeff Danielson	Category/Type																				
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 10	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

1250.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Frank Wood for Senate

Mailing Address P.O. Box 402

City  
Eldridge

State  
IA

Zip Code  
52748

Purpose of Disbursement  
Contribution

Candidate Name  
Frank Wood

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA District: 42

Transaction ID: SB29.14321

Date of Disbursement

/   /

Amount of Each Disbursement this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Hancock for Senate

Mailing Address 310 E. Main Street

City  
Epworth

State  
IA

Zip Code  
52045

Purpose of Disbursement  
Contribution

Candidate Name  
Tom Hancock

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA District: 16

Transaction ID: SB29.14322

Date of Disbursement

/   /

Amount of Each Disbursement this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Heckroth for Senate

Mailing Address 416 West Bremer Avenue

City  
Waverly

State  
IA

Zip Code  
50677

Purpose of Disbursement  
Contribution

Candidate Name  
Bill Heckroth

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA District: 09

Transaction ID: SB29.14350

Date of Disbursement

/   /

Amount of Each Disbursement this Period

250.00

**SUBTOTAL** of Disbursements This Page (optional) .....

750.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Horbach for House of Representatives

Mailing Address 1014 Oakland Drive

City Tama State IA Zip Code 52339

Purpose of Disbursement  
Contribution

Candidate Name  
Lance Horbach

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA District: 40

Transaction ID: SB29.14351

Date of Disbursement

/   /

Amount of Each Disbursement this Period

250.00

**B.** Full Name (Last, First, Middle Initial)  
Huser for State Representative

Mailing Address 213 7th Street NW

City Altoona State IA Zip Code 50009

Purpose of Disbursement  
Contribution

Candidate Name  
Geri Huser

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA District: 42

Transaction ID: SB29.14313

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

**C.** Full Name (Last, First, Middle Initial)  
Iowans for Van Fossen

Mailing Address 2802 Middle Road

City Davenport State IA Zip Code 52803

Purpose of Disbursement  
Contribution

Candidate Name  
James (Jamie) Van Fossen

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA District: 84

Transaction ID: SB29.14318

Date of Disbursement

/   /

Amount of Each Disbursement this Period

250.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Jacoby for House	<b>Transaction ID:</b> SB29.14325 <b>Date of Disbursement</b>																				
Mailing Address 2308 Northridge Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	3		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		0	3		2	0	0	8												
City Coralville State IA Zip Code 52241	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution	<table border="1"> <tr> <td>250.00</td> </tr> </table>	250.00																			
250.00																					
Candidate Name Dave Jacoby	Category/Type																				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 30	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Kettering Campaign	<b>Transaction ID:</b> SB29.14341 <b>Date of Disbursement</b>																				
Mailing Address 275 Crescent Park Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	7		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	7		2	0	0	8												
City Lake View State IA Zip Code 51450	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution	<table border="1"> <tr> <td>250.00</td> </tr> </table>	250.00																			
250.00																					
Candidate Name Steve Kettering	Category/Type																				
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 26	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Mark Zieman for Senate Committee	<b>Transaction ID:</b> SB29.14344 <b>Date of Disbursement</b>																				
Mailing Address 284 Luana Road	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	7		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	7		2	0	0	8												
City Postville State IA Zip Code 52162	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution	<table border="1"> <tr> <td>250.00</td> </tr> </table>	250.00																			
250.00																					
Candidate Name Mark Zieman	Category/Type																				
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 08	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

750.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Murphy for State Representative

Mailing Address 155 North Grandview Avenue

City Dubuque State IA Zip Code 52001-6325

Purpose of Disbursement  
Contribution

Candidate Name  
Pat Murphy

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA District: 28

**Transaction ID:** SB29.14354

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1500.00

**B.** Full Name (Last, First, Middle Initial)  
Nancy Boettger for State Senate Committee

Mailing Address 926 Ironwood

City Harlan State IA Zip Code 51537

Purpose of Disbursement  
Contribution

Candidate Name  
Nancy Boettger

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA District: 29

**Transaction ID:** SB29.14340

Date of Disbursement

/   /

Amount of Each Disbursement this Period

250.00

**C.** Full Name (Last, First, Middle Initial)  
Neighbors for Hatch

Mailing Address 1623 Woodland Avenue

City Des Moines State IA Zip Code 50309

Purpose of Disbursement  
Contribution

Candidate Name  
Jack Hatch

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA District: 33

**Transaction ID:** SB29.14348

Date of Disbursement

/   /

Amount of Each Disbursement this Period

250.00

**SUBTOTAL** of Disbursements This Page (optional) .....

2000.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Oldson for State Representative

Mailing Address 418 38th Place

City State Zip Code  
Des Moines IA 50312

Purpose of Disbursement  
Contribution

Candidate Name  
Jo Oldson

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA District: 61

**Transaction ID:** SB29.14323

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

**B.** Full Name (Last, First, Middle Initial)  
Olive the Supporters of Rich for Senate

Mailing Address 1264 Northridge Road  
P.O. Box 274

City State Zip Code  
Story City IA 50248-0247

Purpose of Disbursement  
Contribution

Candidate Name  
Rich Olive

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA District: 05

**Transaction ID:** SB29.14349

Date of Disbursement

/   /

Amount of Each Disbursement this Period

250.00

**C.** Full Name (Last, First, Middle Initial)  
Petersen for State Representative

Mailing Address 4300 Beaver Hills Drive

City State Zip Code  
Des Moines IA 50310-6300

Purpose of Disbursement  
Contribution

Candidate Name  
Janet Petersen

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA District: 64

**Transaction ID:** SB29.14324

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1250.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Pettengill for Iowans

Mailing Address P.O. Box 76

City  
Mt. Auburn

State  
IA

Zip Code  
52313

Purpose of Disbursement  
Contribution

Candidate Name  
Dawn Pettengill

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA District: 39

Transaction ID: SB29.14315

Date of Disbursement

/   /

Amount of Each Disbursement this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Raecker for State Representative Committee

Mailing Address 9011 Iltis Drive

City  
Urbandale

State  
IA

Zip Code  
50322

Purpose of Disbursement  
Contribution

Candidate Name  
Scott Raecker

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA District: 63

Transaction ID: SB29.14346

Date of Disbursement

/   /

Amount of Each Disbursement this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Rants for State House

Mailing Address 2740 South Glass Street

City  
Sioux City

State  
IA

Zip Code  
51106

Purpose of Disbursement  
Contribution

Candidate Name  
Christopher Rants

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA District: 54

Transaction ID: SB29.14314

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Reasoner for State Representative

Mailing Address 702 New York Avenue

City State Zip Code  
Creston IA 50801

Purpose of Disbursement  
Contribution

Candidate Name  
Mike Reasoner

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA District: 95

Transaction ID: SB29.14311

Date of Disbursement

/   /

Amount of Each Disbursement this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Rielly for Senate

Mailing Address 113 North Market Street

City State Zip Code  
Oskaloosa IA 52577

Purpose of Disbursement  
Contribution

Candidate Name  
Tom Rielly

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA District: 38

Transaction ID: SB29.14347

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Sands for State House

Mailing Address 134 Orchard Lane

City State Zip Code  
Columbus Junction IA 52738

Purpose of Disbursement  
Contribution

Candidate Name  
Thomas Sands

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA District: 87

Transaction ID: SB29.14353

Date of Disbursement

/   /

Amount of Each Disbursement this Period

250.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Soderberg for House

Mailing Address 800 2nd Street SE

City LeMars State IA Zip Code 51031

Purpose of Disbursement  
Contribution

Candidate Name  
Charles Soderberg

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA District: 03

Transaction ID: SB29.14317

Date of Disbursement

06 / 03 / 2008

Amount of Each Disbursement this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Steve Olson for State Representative

Mailing Address 2731 221st Street

City Dewitt State IA Zip Code 52742-9126

Purpose of Disbursement  
Contribution

Candidate Name  
Steve Olson

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA District: 83

Transaction ID: SB29.14352

Date of Disbursement

06 / 17 / 2008

Amount of Each Disbursement this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Tymeson for House

Mailing Address 1524 Highway 169

City Winterset State IA Zip Code 50273

Purpose of Disbursement  
Contribution

Candidate Name  
Jodi Tymeson

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA District: 73

Transaction ID: SB29.14338

Date of Disbursement

06 / 17 / 2008

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional) .....

750.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Ward for Senate

Mailing Address 1545 Glen Oaks Drive

City State Zip Code  
West Des Moines IA 50266

Purpose of Disbursement  
Contribution

Candidate Name  
Pat Ward

Category/  
Type

Office Sought: ☐ House ☒ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA District: 30

**Transaction ID:** SB29.14342

Date of Disbursement

06 / 17 / 2008

Amount of Each Disbursement this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Zaun for Iowa Senate

Mailing Address 7032 Holcomb Avenue

City State Zip Code  
Urbandale IA 50322

Purpose of Disbursement  
Contribution

Candidate Name  
Brad Zaun

Category/  
Type

Office Sought: ☐ House ☒ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA District: 32

**Transaction ID:** SB29.14343

Date of Disbursement

06 / 17 / 2008

Amount of Each Disbursement this Period

250.00

**SUBTOTAL** of Disbursements This Page (optional) .....

500.00

**TOTAL** This Period (last page this line number only) .....

11000.00